

Immunization Registry Progress in Nevada

Note: Unless otherwise stated, the information in this fact sheet was obtained from data and information submitted by the program manager or representative from the immunization program in Nevada. June 1999.

Immunization Coverage in Nevada:

According to National Immunization Survey (NIS) data for July 1997 to June 1998, the percentage of children 19-35 months of age who were up-to-date with 4 doses of diphtheria, tetanus, pertussis, 3 doses of poliomyelitis, and 1 dose of measles, mumps, rubella vaccine was 77%.

Facts about the Nevada's Registry:

- The registry collects and manages immunization data for the entire state of Nevada.
- The targeted age group for the registry is all children from birth through preschoolers.
- Immunization registries, which are integrated with other information systems are more efficient and sustainable, because records can be consolidated and redundant information only needs to be entered once. Currently, entities which link with the registry include:
 - Women, Infants, and Children (WIC) Nutrition Program
 - Schools
 - Private Medical Practice Management/Billing Systems
 - Managed Care Organizations
 - Other registries
- As of April 1999, 27.3% of all providers were enrolled in the registry.

Other unique qualities about Nevada's registry:

- The registry covers the entire state of Nevada with an annual birth cohort of 28,500.
- Currently, 25% of the 0-2 year-old target population has immunization histories in the registry in Northern Nevada.
- Currently, 35% of immunizations are given in the private sector.
- No legislation authorizing a registry exists or is planned.
- A complete operational statewide registry is planned for the year 2001.

Other registry plans, accomplishments, and successes:

Future plans:

- To add a Web interface that will allow providers to retrieve patient information through the Internet. This will enable the immediate retrieval of patient records, will reduce the number of missed immunization opportunities, and keep children on schedule with their shots.
- To link with other health databases (e.g., Cancer Registry, Medicaid, Population Data, Vital Statistics, Communicable Disease Surveillance, etc.)
- To partner with the Health Passport Project. This is a smart card that will improve the integration of services, reduce paperwork, improve quality of care and resources, and enhance the tracking of health care outcomes and medical decision-making by increasing the availability and accuracy of health statistics.

Some challenges and barriers affecting registry progress:

The bankruptcy of Nevada's software registry vendor *Humansoft*, has caused program challenges relating to technical support, recruitment efforts, linkages, marketing, and the maintenance of current registry users. Furthermore, Nevada has been faced with barriers in their efforts to find a new vendor. Specifically, the Request for Proposal (RFP) which was submitted last November has been delayed in several state offices. To date, the RFP has not been announced to the public. Thus, Nevada can not progress with a "new" registry and faces further delays in meeting their goals and objectives.

Current political or legislative factors affecting registry activity:

No political or legislation activity is anticipated at this time that will affect the registry. The State Immunization Program relies on state funds for key programs, including the statewide registry.

Current registry funding:

The registry is funded by CDC, the state/other Health Division programs, and the Robert Wood Johnson Foundation (All Kids Count II).

Helpful immunization and immunization registry contacts in Nevada:

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- Statewide Immunization Group (SIG)
- Washoe County Immunization Coalition (WCIC)
- Southern Nevada Immunization Coalition (SNIC)

Local Managed Care Organizations (MCOs) and Health Maintenance Organizations (HMOs) are instrumental in utilizing resources and expertise to provide the basis of financial sustainability of the registry. Also, local Management Information Systems (MIS) play an integral role in creating and sustaining these network linkages.

The University of Nevada School of Medicine and other State Health Division programs (WIC, MCH, CHS,) are conducive to this network.